| İ | , | | | | Attorney Do | ocket No. | P03,0412 | | |
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| • | | | UTILITY PATENT APPLICA | First Named Inventor or Application Identifier | | | | | |
| l (Or | ılv for | new non | TRANSMITTAL | • | Susanne Wikander | | | | |
| | (Only for new nonprovisional applications under 37 CFR 1.53(b)) | | | | | Express Mail Label No: EL 843732248 US | | | |
| ADI | DRES | S TO: | Commissioner for Mail Stop Patent A PO Box 1450 Alexandria, VA 223 | pplication | | | | PTO 71 | |
| S | ee MF | PEP chap | APPLICATION E | LEMENTS lity patent application cont | ents. | A | CCOMPANYING APPLICATION | ON PARTS 56 | |
| 1. | Ø | Specific | cation | Total Pages | 10 | | | 982 | |
| 2. | \boxtimes | Drawir | ng(s) (35 USC 113) | Total Pages | <u>2</u> 5. | ☐ Ass | ignment Papers (cover sheet | & documentation | |
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| | | а. 🔲 | Executed (original o | r copy) | 6. | ∠ Lett | er under 37 CFR 1.41(c). | | |
| | | b. 🔲 | Copy from prior app | lication (37 CFR 1.63(d)) | 7. | ☐ Eng | lish Translation Document (if | applicable) | |
| | | | (for continuation/div | isional with Box 14 comple | eted) 8. | _ | rmation Disclosure tement (IDS)/PTO-1449 | ☐ Copies of IDS Citations | |
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| | _ | | | R 1.63(d)(2) and 1.33(b). | 11. | ☐ Sma | all Entity Status | | |
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| | | copy of | the oath or declaration | rior application, from whict n is supplied under Box 3t | | <u>Application</u> | on No. 0203107-8 filed Octob | <u>er 22, 2002</u> | |
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I hereby certify that the following is being deposited with the United States Postal "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.

Proposed Patent Application for SUSANNE WIKANDER entitled "MAMMOGRAPHY COMPRESSION PLATE AND X-RAY DIAGNOSTIC APPARATUS EMPLOYING SAME" consisting of specification, claims, abstract, Certified Copy of Swedish application 0203107-8, Letter under 37 CFR § 1.41 (c), 2 sheets of drawings, Filing Fee, Attorney Docket No. P03,0412

Signature of person

mailing application

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